

PARK VIEW HC PLEASANT ACRES  
725 BUTLER AVE

WINNEBAGO 54985 Phone:(920) 235-5100  
Operated from 1/1 To 12/31 Days of Operation: 366  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/04): 117  
Total Licensed Bed Capacity (12/31/04): 117  
Number of Residents on 12/31/04: 117

Ownership:  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 114

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		30.8
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		50.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.7	More Than 4 Years		18.8
Day Services	No	Mental Illness (Org./Psy)	35.0	65 - 74	6.0			-----
Respite Care	No	Mental Illness (Other)	4.3	75 - 84	35.9			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.9	85 - 94	41.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.6	95 & Over	9.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.6		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.6		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	8.5	65 & Over	92.3	-----		
Transportation	No	Cerebrovascular	8.5		-----	RNs		14.5
Referral Service	No	Diabetes	6.0	Gender	%	LPNs		1.7
Other Services	Yes	Respiratory	8.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	20.5	Male	26.5	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	73.5			53.8
Provide Day Programming for			100.0		-----	-----		
Developmentally Disabled	No				100.0	-----		

## Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	2	2.2	140	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.7	
Skilled Care	10	100.0	302	86	94.5	119	0	0.0	0	16	100.0	170	0	0.0	0	0	0.0	0	112	95.7	
Intermediate	---	---	---	3	3.3	98	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	2.6	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	10	100.0		91	100.0		0	0.0		16	100.0		0	0.0		0	0.0		117	100.0	

***** Admissions, Discharges, and Deaths During Reporting Period							Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04		
Percent Admissions from:			Activities of		% Needing		% Totally		Total
			Daily Living (ADL)		Assistance of		Dependent		Number of
					One Or Two Staff				Residents
Private Home/No Home Health	16.9		Bathing	0.0	76.9		23.1		117
Private Home/With Home Health	0.0		Dressing	17.9	60.7		21.4		117
Other Nursing Homes	6.7		Transferring	28.2	53.8		17.9		117
Acute Care Hospitals	70.8		Toilet Use	25.6	51.3		23.1		117
Psych. Hosp.-MR/DD Facilities	0.0		Eating	67.5	13.7		18.8		117
Rehabilitation Hospitals	0.0		*****						
Other Locations	5.6		Continence		%		Special Treatments		%
Total Number of Admissions	89		Indwelling Or External Catheter	6.0			Receiving Respiratory Care		15.4
Percent Discharges To:			Occ/Freq. Incontinent of Bladder	52.1			Receiving Tracheostomy Care		0.0
Private Home/No Home Health	33.3		Occ/Freq. Incontinent of Bowel	31.6			Receiving Suctioning		0.0
Private Home/With Home Health	0.0						Receiving Ostomy Care		2.6
Other Nursing Homes	14.9		Mobility				Receiving Tube Feeding		1.7
Acute Care Hospitals	10.3		Physically Restrained	0.9			Receiving Mechanically Altered Diets		33.3
Psych. Hosp.-MR/DD Facilities	0.0						Other Resident Characteristics		
Rehabilitation Hospitals	0.0		Skin Care				Have Advance Directives		72.6
Other Locations	5.7		With Pressure Sores	5.1			Medications		
Deaths	35.6		With Rashes	0.0			Receiving Psychoactive Drugs		53.0
Total Number of Discharges									
(Including Deaths)	87								

\*\*\*\*\*  
Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

*****									
		This Facility	Ownership: Government	Bed Size: 100-199	Licensure: Skilled	All Facilities			
		%	Peer Group % Ratio	Peer Group % Ratio	Peer Group % Ratio	% Ratio	% Ratio	% Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds		97.7	93.1 1.05	90.2 1.08	90.5 1.08	88.8 1.10			
Current Residents from In-County		96.6	86.2 1.12	82.9 1.17	82.4 1.17	77.4 1.25			
Admissions from In-County, Still Residing		40.4	33.0 1.22	19.7 2.05	20.0 2.02	19.4 2.08			
Admissions/Average Daily Census		78.1	79.1 0.99	169.5 0.46	156.2 0.50	146.5 0.53			
Discharges/Average Daily Census		76.3	78.7 0.97	170.5 0.45	158.4 0.48	148.0 0.52			
Discharges To Private Residence/Average Daily Census		25.4	29.9 0.85	77.4 0.33	72.4 0.35	66.9 0.38			
Residents Receiving Skilled Care		97.4	89.7 1.09	95.4 1.02	94.7 1.03	89.9 1.08			
Residents Aged 65 and Older		92.3	84.0 1.10	91.4 1.01	91.8 1.01	87.9 1.05			
Title 19 (Medicaid) Funded Residents		77.8	73.3 1.06	62.5 1.25	62.7 1.24	66.1 1.18			
Private Pay Funded Residents		13.7	18.3 0.75	21.7 0.63	23.3 0.59	20.6 0.67			
Developmentally Disabled Residents		0.0	2.7 0.00	0.9 0.00	1.1 0.00	6.0 0.00			
Mentally Ill Residents		39.3	53.0 0.74	36.8 1.07	37.3 1.05	33.6 1.17			
General Medical Service Residents		20.5	18.6 1.10	19.6 1.05	20.4 1.00	21.1 0.97			
Impaired ADL (Mean)		46.7	47.5 0.98	48.8 0.96	48.8 0.96	49.4 0.94			
Psychological Problems		53.0	69.4 0.76	57.5 0.92	59.4 0.89	57.7 0.92			
Nursing Care Required (Mean)		7.3	7.4 0.98	6.7 1.08	6.9 1.05	7.4 0.98			